

ISSUE SLIP STAPLE AREA (for additional cross references)

69665 7-7-99

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | MM | 67874 | 2/16/99 |
| O.I.P.E. CLASSIFIER | 10. | 59 | 2/18 |
| FORMALITY REVIEW | | 69665 | 2-24 |

INDEX OF CLAIMS

< Rejected
 = Allowed
 (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here